

REMARKS

A Request for a Two (2) Month Extension of Time pursuant to 37 CFR §1.136(a) and (b) is attached hereto.

Applicants have carefully reviewed the above-captioned patent application in light of the non-final Office Action to which this Amendment is herein responsive. Claims 1-89 have been canceled in favor of new Claims 90-109 in an effort to further clarify and distinctly point out that which is regarded as the invention. To that end, it is believed no new matter has been added.

Claims 1, 3, 7, 8, 18, 24, 30-35, 38-45, 47-49, 60-62, 64-70, 72-76, 79-84, and 89 were previously pending in the current application, Claims 2, 4-6, 9-17, 19-23, 25-29, 36, 37, 46, 50-59, 63, 71, 77, 78, and 85-88 having been previously restricted. Applicants herein acknowledge the previous Restriction Requirement and the telephonic election of the above claims made by Applicants' representative. To that end, each of the previously pending claims, including the previously unelected claims have now been canceled in an effort to expedite prosecution of the above-captioned patent application. Applicants respectfully reserve the right to file divisional application(s) to claims that are directed to unelected subject matter.

Each of the elected claims have been rejected based on certain prior art. In addition, Claims 66 and 75 have been rejected under Section 112 of the Statute. Applicants respectfully request reconsideration based on the new claims and the following discussion.

As to the prior art rejections, the Examiner has rejected the pending claims under Section 102 based on several different prior art references. More particularly, Claims 1, 3, 7, 8, 24, 30, 31, 33, 34, 35, 38, 40-42, 45, 47, 48, 49, 60, 62, 64-70, 72-76, 80, 82, 83 and 89 have been rejected under 35 USC §102(b) as being anticipated by Halpern et al. (U.S. Patent No. 5,687,717); Claims 1, 3, 8, 24, 30-32, 34, 38-41, 45, 47, 48, 49, 60, 62, 65-67, 69, 70, 73-76, 82, 84 and 89 have been rejected under 35 USC §102(b) as being anticipated by Mault (U.S. Patent No. 6,478,736); Claims 1, 7 and 18 have been rejected under 35 USC §102(e) as being anticipated by Lin et al. (U.S. Patent Publication No. 2002/0087054 A); Claims 1, 42-44, 81 and 87 have

been rejected under 35 USC §102(e) based upon Hanna (U.S. Patent No. 6,450,966 B1); and Claims 1 and 61 have been rejected under 35 USC §102(e) as being anticipated by Drinan et al. (U.S. Patent No. 6,354,996 B1). Applicants herein believe each of the preceding prior art rejections are moot with the exception of the rejections of Claims 42-44 based on Hanna based on the above-noted cancellation of claims in the above-captioned patent application. To that end, Applicants have now combined the features of canceled Claims 42 and 43 into new independent Claims 90 and 107.

In order to successfully anticipate under the Statute, each and every claimed limitation must be found in the single cited reference. Those limitations that are not found in the cited art must be notoriously well known to one of sufficient (e.g., ordinary) skill in the field of the invention.

Hanna (U.S. Patent No. 6,450,966 B1) describes apparatus that is specific to sphygmomanometers and in particular to apparatus used to identify a cuff assembly, such as a neonatal, pediatric and/or adult sized cuff. The reason to identify the cuff according to the reference is to insure a proper inflation pressure is utilized. The method described by this reference requires the utilization of a gas flow restrictor that is employed in each cuff assembly in order to allow a pressure measurement to be made during deflation thereof. A pair of pressure transducers are provided in which a ratio of automatic pressure measurements through partial inflation/deflation of the cuff prior to actual measurement is deduced in order to identify the cuff that is being used.

The present invention, on the other hand, employs a workstation that includes a sphygmomanometer as well as a computing device. The concept employed by the present invention does not require a specific test of the mechanics of the cuff itself, but rather relies upon captured data involving the patient in order to determine and apply a suitable inflation pressure for the cuff prior to measurement. According to at least one embodiment, the computing device may already have stored data contained in its database relating to the patient, including blood pressure data. By examination of this data, it can be concluded, for example, whether the patient is hypotensive

(having a typical blood pressure reading that is below a so-called normal range of a population of patients) or hypertensive (having a typical blood pressure reading that is higher than the "normal" population of patients). In any event, each of the patient's normal blood pressures are somewhat patient specific. By examination of these readings, the workstation can be suitably programmed to operate a pressure control assembly of the sphygmomanometer to permit a different inflation pressure that is suitable for the patient. Similarly, the workstation can be configured to provide alerts for patients that exceed a predetermined range of "acceptable" readings. By means of similar logic in understanding and examining the patient readings, the alerts can be automatically adjusted based on the type of patient and what normal readings are associated with the patient. According to a further variation, the workstation can include a device, such as a bar-code scanner that is capable of reading machine-readable language wherein the cuff can include symbology that can be scanned to automatically program the pressure control assembly of the sphygmomanometer based on the type of cuff used. In each of the foregoing instances, no equipment is required to actually test the cuff assembly as required by Hanna.

Applicants have added new independent Claims 90, 104, 107 and 109 to fully point out these essential differences. As noted above, new Claim 90 relates to a workstation that is defined by an assemblage supporting a computing device and at least one medical device. The computing device receives physiologic data from the at least one medical device for storage. The at least one supported medical device includes a sphygmomanometer having an inflatable cuff and a pressure control assembly for inflating and deflating the cuff. The pressure control assembly is connected to the workstation such that the cuff is controlled to a predetermined inflation pressure based on the status of the patient. Claim 107 is a method version of new Claim 90.

Dependent Claims 91-103 each add features to new Claim 90 and dependent Claim 108 relies upon Claim 107. Support for each of these claims is provided in the above-captioned patent application. The Examiner is referred to page 34, paragraph 150. Therefore, it is believed no new matter has been added.

New Claims 104-106 and 109 have also been added relating to the alerts features discussed above wherein alerts can be programmed depending on the status of the patient; for example, on whether the patient is normally hypertensive or hypotensive. As to these claims, support is also found in the above-captioned application, as found on page 34, paragraph 150, for example.

None of the remaining cited prior art, either alone or in combination, appears to include, suggest, infer or otherwise introduce the features as now recited in new Claims 90-109. Therefore, it is believed these claims are patentably distinct and should be deemed allowable. The Section 112 rejection are also believed to be moot in light of the new claims and therefore withdrawal is respectfully requested.

In summary, it is believed the above-captioned patent application is now in an allowable condition and such allowance is earnestly solicited.

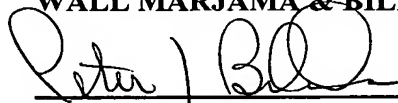
If the Examiner wishes to expedite disposition of the above-captioned patent application, he is invited to contact Applicant's representative at the telephone number below.

The Director is hereby authorized to charge any additional fees associated with this communication or credit any overpayment to Deposit Account No. 50-0289.

Respectfully submitted,

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